Cataract-free Zone

1141. SHRI B. K. HARIPRASAD : Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state :

(a) whether Government's attention has been drawn to the report which appeared in "The Economic Times", dated October 27, 1992 to the effect that Faridabad (Haryana) District attained the distinction of the country's second 'Cataract-free Zone';

(b) whether Government have taken note of the claim by the voluntary health: project Nayantara that the entire country could be liberated from the sourage of cataract within four years if two base camp hospitals in primary health centres (PHCs) in each district and voluntary organisations are motivated to join hands; and

(c) if so, whether Government arc in itiating any such projects elsewhere in the country especially in Karnataka and Andhra Pradesh ?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI D. K. THARA DEVI SIDDHARTHA) : (a) to (c) Yes, Sir. The removal of the backlog of cataract cases has been handled successfully in some parts of the country. However, different strategies which inter-alia include the base hospital strategy and camp approach have proved successful on a location specific basis. The State Governments are undertaking cataract removal programme within the ambit of National Programme for Control of Blindness. The Government of Andhra Pradesh and Karnataka have already formulated preliminary proposals for an intensive programme for prevention and control of Blindness in their states.

Barring Parents with above two children from holding electoral office

1412. SHRI V. GOPALSAMY .

SHRI J. S. RAJU :

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to stale :

(a) whether any decision was taken by the National Development Council to 8—408RSS/93

debar those with more than two children from holding any electoral office; and

(b) if so, whether the modalities of implementing the decision have been worked out.

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI D. K. THARA DEVI SIDDHARTHA) : (a) No, Sir.

(b) Does not arise.

Hospital of Hazards

1413. SHRI PRAMOD MAHAJAN :
SHRI VTREN J. SHAH :

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state :

(a) whether Government's attention has been drawn to the news report which published in the Indian Express of the 16th November, 1992 under the caption "Hospital of Hazards";

(b) if so, what are the details in this regard; and

(c) what steps Government have taken so far to check deterioration of *service* in All India Institute of Medical Sciences and other Government hospitals in Delhi ?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI D. K. THARA DEVI SIDDHARTHA) : (a) and (b) Yes, Sir. The report relates to various matters with particular reference to .infection levels in the C.T.V.S. and Neurology Department of AIIMS.

(c) Insofar as the AIIMS is concerned, the Hospital Infection Control Committee of the Institute has reviewed the matter' in detail and found the samples obtained from the C.T.V.S. Department within acceptable limits. It was found that the C.T.V.S. Centre has followed all the standard procedures and norms of sterilisation and fumigation as laid down by the said Committee. As regards other Government hospitals in Delhi, the Hospital Management Department/Cell/Committee/Administration oversee that the sanitary conditions in and around the hospitals are hygienic and free from infection Efforts arc made each year to upgrade tN

facilities in Govt. hospitals within the priorities of each hospital and the overall availability of resources.

राजस्थान में परिवार नियोजन पर व्यय की गई राशि

1414. श्री शिवचरण सिंह : क्या स्वास्थ्य और परिवार कल्याण मंत्री यह बताने की कृपा करेंगे कि :

(क) राजस्थान में परिवार कल्याण कार्यक्रमों और डिस्पैंसरियों पर केन्द्र सरकार और राज्य सरकार द्वारा प्रतिवर्ष कितनी-कितनी राशि व्यय की जाती है;

(ख) केन्द्र सरकार राजस्थान राज्य में कितने अस्पताल चला रही है और उनमें कितने चिकित्सक कार्यरत हैं; और

(ग) क्या यह सच है कि राजस्थान में परिवार नियोजन कार्यक्रम सफलतापूर्वक चल रहा है और यदि हां, तो इस संबंध में अच्छे परिणाम हासिल करने के लिए राजस्थान को क्या प्रोत्साहन दिए जा रहे हैं ?

स्वास्थ्य और परिवार कल्याण मंत्रालय में राज्य मंत्री (श्रीमती डी० के० तारादेवी सिद्धार्थ) : (क) परिवार कल्याण कार्यक्रम शत-प्रतिशत केन्द्रीय प्रायोजित योजना है । राजस्थान सरकार को अनुमोदित कार्यक्रमों के लिए केन्द्र सरकार द्वारा धनराशि उपलब्ध कराई जाती है । खर्च की गई राशि का ब्यौरा अनुपत्र-1 में दिया गया है । (देखिए परिशिष्ट 165, अनुपत्र संख्या 25) ।

(ख) 217 सामुदायिक स्वास्थ्य केन्द्रों तथा 1373 प्राथमिक स्वास्थ्य केन्द्रों के माध्यम से परिवार नियोजन सेवाएं भी प्रदान की जाती हैं जिनको राज्य योजना के अंतर्गत धन दिया जाता है ।

केन्द्र/राज्य योजनाओं के अंतर्गत धनराशि प्रदान किए गए विभिन्न संस्थानों में कार्य कर रहे डाक्टरों की संख्या के संबंध में भी सूचना राज्य सरकार से एकत्र की जा रही है ।

(ग) वर्ष 1990-91 और 1991-92 के दौरान विभिन्न परिवार नियोजन के तरीकों के लिए लक्ष्यों और उपलब्धियों को दर्शाने वाला एक विवरण अनुपत्र-II पर संलग्न है (देखिए परिशिष्ट 165, अनुपत्र संख्या 26) परिवार कल्याण कार्यक्रम के अंतर्गत राज्य सरकारों को प्रोत्साहन देने की कोई योजना नहीं है ।

Amendment to Medical Council of India Act, 1936

1415. SHRI PASUMPON THA. KIRUTTINAN : SHRI V. G OPALS AMY :

WJ1 the Minister of HEALTH AND FAMILY WELFARE be pleased to state :

(a) whether Government have finalised the proposed Bill to amend the Medical Council of lndia Act of 1936; and

(b) if so, what are the changes proposed in the Bill ?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI D. K. THARA DEVI SIDDIIARTHA) : (a) and (b) Indian Medical Council (Amendment) Bill, 1987 as reported by the Joint Com mittee of Parliament could not be pro cessed for passing by the Parliament as there has been change of the Government and certain provisions of the original Bill were under re-examination. In the meantime, the Supreme Court in their Judgement dated 30-7-92 passed orders which partially had implications on the policy under consideration. However, an ordinance was promulgated by the President to amend the Indian Medical Council Act on 27-8-92 "providing for" prior approval of the Central Government before starting a new medical college or a higher course of study or training or increasing the admission capacity in existing medical colleges. A Rill io re-